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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 06/12/2004**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY INDIA	SHEETS DRAWING 0	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____	Initials _____			

**ADDRESS**

7278

**TITLE**

SIMULTANEOUS RECOVERY OF POTASSIUM CHLORIDE AND KCL ENRICHED EDIBLE SALT

<b>FILING FEE RECEIVED 1220</b>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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